POSITION	INITIALS	ID NO.	DATE
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O.I.P.E. CLASSIFIER	Dr-	<u> </u>	1// /
FORMALITY REVIEW	H.T	913	11915/01
RESPONSE FORMALITY REVIEW			

## **INDEX OF CLAIMS**

Rejected	N Non-elected
=Allowed	1 Interference
(Through numeral) Canceled	A Appeal
- Restricted	O Objected

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